Express Yourself!

UMD KIDSROCK Summer Camp will provide a variety of activities to stimulate the mind, body and spirit. Each week offers a new mix of activities and themes!
CAMP OVERVIEW

Weekly Day-Camp (9:00 AM – 4 PM) for Ages 5-15

The Recreational Sports Outdoor Program (RSOP) coordinates the UMD KIDSROCK youth summer camps as part of the RSOP Youth Program. UMD KIDSROCK summer camp program is a weeklong day camp offered for nine weeks, including multiple Specialty Camps and a Junior Counselor Program, during the summer (June-August). All camps are activity based with experiential and educational components for youth participants.

Registration Day Event

UMD KIDSROCK summer camp registration begins Saturday, March 2nd from 9 AM – 1 PM in SpHC 135. This is an in-person event only (no phone calls) where all participants will receive the Registration Day Discount. After this event all registrations will occur through RSOP’s main office, SpHC 153.

CAMP CONTACTS

UMD KIDSROCK Summer Staff
Camp Coordinator ... MAYHEM
Camp Coordinator ... JOEL

HOMEBASE: UMD Sports and Health Center 135
RSOP OFFICE: Recreational Sports Outdoor Program (RSOP) office is located in room 153 of the UMD Sports & Health Center.
Summer Office Hours: Mon-Fri 8:00am-4:00pm
Camp Phone: (218) 391-9886
RSOP Office: (218) 726-7128
Instagram: @umdkidsrock
Address: UMD KIDSROCK (RSOP)
1216 Ordean Court
153 Sports & Health Center (SpHC)
Duluth, MN 55812
RSOP Website www.umdrsop.org
FACEBOOK: “UMD Recreational Sports Outdoor Program”

REWARDS & DISCOUNTS

UMD Student & Faculty or Staff Discount – 5% off
This discount is valid for all current UMD Students and Faculty or Staff members throughout the summer, for all RSOP Youth Programs (see our webpage for more details).

Registration Day Discount - 10% off
Everyone that registers on March 2nd, 2019 at our Registration Day Event form 9 AM – 1 PM in SpHC 153 will receive 10% off your UMD KIDSROCK total bill. The UMD Faculty & Staff Discount does not apply during this event.

GENERAL CAMP POLICIES

REGISTRATION POLICY:
Registration is based upon first come, full payment basis. See the RSOP website for more policy details.

CANCELLATION POLICY:
A full refund (less a $20 transaction fee) will be given if written cancellation is made 14 days prior to the camp start date. See the RSOP website for the complete policy details www.umdrsop.org

ADDITIONAL INFORMATION:
The University of Minnesota Duluth (UMD) is an equal opportunity educator and employer. To learn more about our available youth scholarships, or to read more about our programs please visit the RSOP website at www.umdrsop.org

TO REGISTER: STOP BY 153 SPORTS & HEALTH CENTER CALL 218-726-7128 OR VISIT UMDSOP.ORG

RECREATIONAL SPORTS OUTDOOR PROGRAM IS A STUDENT SERVICE FEE SUPPORTED ORGANIZATION. THE UNIVERSITY OF MINNESOTA DULUTH IS AN EQUAL OPPORTUNITY EDUCATOR AND EMPLOYER.
CLASSIC CAMP

UMD KIDSROCK Classic Camps are weeklong day camps that provide an exciting environment for children to be active, creative, and learn within small age-appropriate groups. Each week of Classic Camp has a theme with related activities, projects, Special Events & Dress-up days.

<table>
<thead>
<tr>
<th>CLASSIC CAMP</th>
<th>DRESS-UP FRIDAY</th>
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<tbody>
<tr>
<td>Wk1 COLOR WEEK</td>
<td>Most Colorful Camper Day</td>
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<tr>
<td>Wk2 ANIMAL WEEK</td>
<td>Best Animal Costume Day</td>
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<td>Wk3 CARNIVAL WEEK</td>
<td>Dress as a counselor Day</td>
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<td>Wk4 AMERICA WEEK</td>
<td>Red, White &amp; Blue Day</td>
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<td>Wk5 DISNEY WEEK</td>
<td>Disney Character Day</td>
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<td>Wk6 TALENT WEEK</td>
<td>Awesome Rock Star Day</td>
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<td>Wk7 MINNESOTA WEEK</td>
<td>Lumber Jack &amp; Jill Day</td>
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<td>Wk8 SUPER HERO WEEK</td>
<td>Super Hero Day</td>
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<td>Wk9 LUAU WEEK</td>
<td>Hawaiian Day</td>
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All Camp Games

The last hour of camp every day is scheduled for an All Camp Game that includes all campers from every camp and age group. The All Camp Game is optional and those campers that opt not to participate will have a number of other supervised games and activities to enjoy. All Camp Game favorites are “Doctor, Doctor!” “Chaos Basketball” “Ultimate Noodle Tag” “Capture the Bean-bags” and many, many more!

DAILY CAMP SCHEDULE

Below is a general outline of the daily camp schedule...

**Camper Check-in**

- 7:45am to 9:00am
  - Small Group Games
- 9:00am to 11:45am
  - Lunch Time
- 11:45am to 1:15pm
  - Swim Time
- 1:15pm to 2:45pm
  - Snack Time
- 2:45pm to 3:00pm
  - All Camp Games
- 3:00pm to 4:00pm
  - Camper Check-out
  - 4:00pm to 4:45pm

**Post Camp**

- Additional fee >>>>
- Daily Fee: $5.00
- Weekly Fee: $15.00

** Post Camp time is supervised by the staff counselors as unstructured play-time, and allows parents/guardians to pick up their child 4:45pm after camp ends; additional late pick-up fees will be assessed after 5:30pm.**

SUMMER CAMP RULES

The following are the UMD KIDSROCK Camp Rules.

1. Respect your Counselors at all times.
   - Be helpful not hurtful
   - Leave all of your toys at home
2. Respect all other camp participant at all times.
   - Treat others the way you would like to be treated
   - No sharing food with other campers
3. Respect the Property and Rules of all UMD facilities
   - Always clean up after yourself
   - Leave nature in nature

To register, stop by 153 Sports & Health Center, call 218-726-7128 or visit umdscop.org.
**DAILY CAMP INFORMATION**

**Check-in & Check-out**
For Check-in, a camp counselor will have a camp roster sheet for the parents or guardians to sign-in each of their campers. Campers may be signed in as early as 7:45am and each must be signed in before participating in camp that day. For Check-out, a camp counselor will have the same camp roster sheet for parents or guardians to sign-out each of their campers. Only adults listed on the Check-out Approval List (see pg. 9) may pick up campers.

**Lunch Time**
Every day the campers and counselors will eat lunch 12:00pm to 1:00pm. We are unable to provide a heating or cooling source for their lunch, so please pack daily lunch accordingly. All campers must provide their own lunch each day and only siblings may share food at lunch. In order to provide a safe eating environment for those campers with food allergies, trading and/or sharing food is prohibited at camp. After campers are done with lunch they are encouraged to join in on games and active play with other campers and the counselors until the conclusion of Lunch Time. Parents are also welcome to visit and join us for lunch anytime!

**Swim Time**
Campers have the option to swim every day at camp! Swim Time is an option; all campers that choose not to swim will be able to hangout in Homebase for indoor play-time and game-time supervised by the counselors. Swim Time is supervised by camp counselors and monitored by certified RSOP Lifeguarding staff. All campers that do not pass the Summer Camp Swim Test will be provided with a personal flotation device. Campers may bring their own flotation devices. All personal flotation devices (puddle-jumper, lifejacket, etc.) must be certified by the US Coast Guard (USCG) and properly fit the child. All campers will need to pass the Summer Camp Swim Test (see pg. 7) to swim without a personal flotation device and utilize the deep end of the pool.

**Snack Time**
The snack during Snack Time is free to all and completely optional every day. Campers may choose not to have the snack we provide, and all campers are encouraged to pack a snack of their liking to enjoy during the afternoon all-camp Snack Time. For afternoon snacks we typically provide the following items on a randomized daily basis: Honey Maid Graham Crackers, Rold Gold Twists/Stick Pretzels, Nabisco Nilla Wafers, Pepperidge Farm Goldfish Crackers, Kettlecorn Popcorn, Nabisco Ritz Crackers, Sunshine Cheez-It Crackers, and at times a Freezer-Pop, Popsicle or Ice Cream Sandwich (other options available as needed).

**BUDDY SYSTEM**
All campers that for any reason need to separate from the main group of campers (restroom break, drink of water, etc.) must find a fellow camper (“buddy”) then find a camp counselor to escort them to where the two campers need to go. The Buddy System ensures that no camper is left alone or wanders off from the camp group, and that a camper and counselor are not ever alone together. Our camp staff have been well trained to utilize this system and are very willing to accommodate any needs or requests that a camper has as long as they have a buddy and ask a counselor.

**Early Check-out & Daily Notes**
During Check-in, adults dropping off campers are asked to inform the camp counselor with the Check-in Roster Sheet if the camper has an early check-out time, is going home with another camper or any other special circumstance that day. This information will be noted to all staff and will help us to provide a smooth transition for a timely pick-up. If plans change after Check-in you can call our camp phone, 218-391-9886. During Check-out, our staff may have notes concerning the camper’s behavior, minor accidents or injuries, as well as special event reminders happening the next day or that week. So it is important to always Check-in and Check-out your campers using our camp roster sheet with one of our camp counselors.
VENTURE CAMP  
**Ages 12-15**  
**Week 5 & Week 9**

Venture Camp is a weeklong camp that provides a stimulating social and active environment with age appropriate weekly programming for young teenagers that include leadership, outdoor exploration, and health and wellness. We are offering two weeklong Venture Camps this summer focus on the outdoor experience and both offer overnight camping during the week. General camping gear (tent, sleeping bag, etc.) is provided, however if a camper has their own gear they are welcome to use it in Venture Camp. Venture Campers must provide their own personal camping gear (clothes, shoes, etc.) during the overnight camping. All Venture Camp participants should be comfortable with sleeping overnight in a tent (through all weather) and must demonstrate the camping safety skills taught within the first two days of camp before they are allowed to continue to participate in overnight camping trips.

**Gooseberry Falls Venture** (Week 5: July 8-12) is a weeklong specialty camp that provides campers with a hiking and overnight camping experience at Gooseberry Falls State Park. Campers will be trained in outdoor skills, on-campus, within the Bagley Nature Area preparing them for a two-day exploration of Gooseberry Falls.

**Boulder Lake Venture** (Week 9: Aug. 5-9) is a weeklong specialty camp that provides campers with a canoeing, hiking and overnight camping experience at the beautiful Boulder Lake Nature Area. Campers will be trained in outdoor skills, on-campus, within the Bagley Nature Area preparing them for a two-day exploration of Boulder Lake Nature Area.

CLIMBING CAMP  
**Ages 8-12**  
**Weeks 1, 2, 3, 5, 6, & 7**

Climbing Camp is a weeklong specialty camp that provides campers with firsthand experience, training, knowledge, skills, and practice in climbing indoor and outdoor for all levels and abilities. KIDSROCK will provide all necessary climbing equipment, however campers are encouraged to bring their own climbing gear to camp. All personal climbing gear must be inspected and approved by a camp counselor before a camper is allowed to use it at camp. Campers will utilize the indoor climbing wall at UMD and take climbing trips to Ely's Peak, Silver Cliff, and Whooppee Wall.

BIKING CAMP  
**Ages 8-12**  
**Week 2 & Week 3**

Biking Camp is a weeklong specialty camp that provides campers with firsthand experience, training, knowledge, skills, and practice in road biking and trail riding for all levels and abilities. KIDSROCK can provide some bike equipment, however campers are asked to bring their own bike helmet, bike (capable of changing gears), and personal cycling gear to camp. All personal gear must be inspected and approved by a camp counselor before a camper is allowed to use it at camp. Campers will ride their bikes around UMD Campus, through Hartley Park trails, Lester Park trails, and the many other local bike trails of Duluth. All campers registered for Biking Camp must be able to ride for 10 minutes without stopping and demonstrate the bike safety skills taught within the first two days of camp before they are allowed to continue to participate in longer distance trail rides and road tour rides.

RIVER CAMP  
**Ages 8-12**  
**Week 8 & Week 9**

River Camp is a weeklong specialty camp that provides campers with firsthand experience, training, knowledge, skills, and practice in paddle sports and river activities for all levels and abilities. KIDSROCK will provide all necessary paddling and general river equipment, however campers are asked to bring their own lifejacket and personal swimming gear (water shoes, swimsuit, towel, etc.) to camp. All personal floatation devices must be inspected and approved by a camp counselor and must be certified by the US Coast Guard (USCG) before a camper is allowed to use it at River Camp. All campers registered for River Camp must pass the Summer Camp Swim Test (see pg.7) before they are allowed to continue to participate in River Camp activities. Campers will explore and learn about the local rivers and Lake Superior while canoeing, paddle boarding, and enjoying other river activities.
Cosmos Camp  
**Ages 8-12**  
**Week 6**

Camp Cosmos is a weeklong specialty camp that provides campers with an experience that is out of this world. Campers will explore the cosmos in the Marshall W. Alworth Planetarium guided by astronomy experts and enthusiasts. Throughout the week, campers will learn how to navigate the night sky and then hop in our space ship and journey from Earth through the Solar System and beyond! Campers will spend the morning in the Planetarium enjoying activities planned by UMD Planetarium Staff.

Pharm Camp  
**Ages 8-12**  
**Week 7**

This weeklong camp provides campers with fun and interactive hands-on learning about medicine and pharmacy! Campers will identify medicinal plants on a nature hike, learn how to compound their own lip balm, attempt to solve a pharmacy-themed escape room, and more! Campers will spend the morning in the Pharmacy School enjoying activities planned by UMD Pharmacy Professionals.

Spanish Camp  
**Ages 6-9**  
**Week 8**

This week, campers will gain vocabulary, expand their knowledge of communities and cultures where Spanish is spoken, and become more comfortable in the target language through fun activities led in Spanish indoors and outdoors. Open to all levels of Spanish learners. Beginning concepts will be explored and will be modified to suit the level of all Spanish learner campers. Campers will spend the morning in the College of Liberal Arts enjoying activities planned by UMD Spanish Faculty and UMD Spanish Club Students.

**JUNIOR COUNSELOR PROGRAM**  
**Ages 14-17**  
**All Summer**

The Junior Counselor (JC) Program offers 14-17 year olds an opportunity to experience the responsibilities of camp operations in a fun learning environment. There is a $60.00 workshop fee that will cover general supplies, staff training, CPR/First Aid training and certification, and weekly staff costs involved with this program. The JC Program is designed for high school students who would like to further enhance their leadership skills and learn what it is like to be a UMD KIDSROCK counselor, while earning volunteer hours. All Junior Counselors will be placed into a camp group, alongside our full-time camp counselor staff, and assist with daily responsibilities, tasks and duties of summer camp. These duties including: dynamically interacting with the campers, facilitating energetic games and projects, monitoring the safety of camp and participating in the various camp events. In exchange, Junior Counselors will gain positive workplace experience, American Red Cross Certifications, and leadership skills in a fun creative environment.

Due to the popularity of the UMD KIDSROCK JC Program, we unfortunately cannot guarantee a spot to everyone who wishes to participate. The $60.00 workshop fee applies to all participants of the Junior Counselors workshop, and is due on or before the UMD KIDSROCK Jr Counselor Workshop in June. For more information and those interested in applying to be a KIDSROCK JC Program this summer, please email kidsrock@d.umn.edu with your questions or visit the RSOP website.

TO REGISTER: STOP BY 153 SPORTS & HEALTH CENTER CALL 218-726-7128 OR VISIT LMDRSGPORG
Program Waivers & Releases

The information collected in following forms of this packet will provide the RSOP Youth Program staff with the essential information to ensure your child’s safety, and help our staff provide an enjoyable program experience for your child. Please note that an array of program activities will take place both indoors and outdoors in varying weather conditions. Most youth programs involve activities such as running, swimming, jumping, climbing, boating and other physical activities.

Please read carefully and complete this form and answer all BOLD (highlighted) questions.

University of Minnesota, Duluth RSOP Youth Programs

- RELEASE OF LIABILITY -

RSOP Program: UMD KIDSROCK 2019  Date of Program: June 10th through to August 9th, 2019

CHILD’S NAME:

In consideration of being allowed to participate in any way in the above listed camp or seminar, related events and activities, I, the undersigned, acknowledge, appreciate and agree, on behalf of my child, that:

1. While particular rules, equipment, and personal discipline may reduce this risk, the risk of serious injury does exist and that risk of injury from the activities involved in these programs is significant, including the potential for permanent injury; and
2. I knowingly and freely assume all such risks, both known and unknown, and assume full responsibility for my child’s participation; and
3. I acknowledge and consent to the use of video recordings and photographs of my child’s participation in promotional activities conducted by Releases; and
4. I willingly agree that my child will be instructed to comply with the stated and customary terms and conditions for participation. I will instruct my child, however, if they observe any unusual significant hazard during their presence or participation, they should remove themselves from participation and bring such to the attention of the nearest official immediately; and
5. I understand that if I choose to drive my child in my own vehicle or allow them to be a passenger in a non-University vehicle while traveling to and/or from a seminar, camp, or club event or activity, University automobile liability insurance coverage will not apply; and
6. I, for my child, and on behalf of my child’s heirs, assigns, personal representatives and next of kin, hereby release, indemnify and hold harmless Regents of the University of Minnesota and the Recreational Sports Outdoor Program, their officers, officials, agents and/or employees, other participants, sponsoring agencies, sponsors, advertisers, and, if applicable, owners and lessors of premises used to conduct the event or activity (“Releasees”) with respect to any and all injury, disability, or loss or damage to person or property, to the fullest extent permitted by law.

I HAVE READ THIS RELEASE OF LIABILITY AND ASSUMPTION OF RISK AGREEMENT, FULLY UNDERSTAND ITS TERMS, UNDERSTAND THAT I HAVE GIVEN UP SUBSTANTIAL RIGHTS, ON BEHALF OF MY CHILD, BY SIGNING IT, AND SIGN IT FREELY AND VOLUNTARILY WITHOUT ANY INDUCEMENT.

PARENT/GUARDIAN SIGNATURE: ______________________  DATE: __________

PARENT/GUARDIAN SIGNATURE: ______________________  DATE: __________

SECTION 2: Guardian Acknowledgement of Swim Test:

As the parent/guardian of Print Child’s Full Name, I acknowledge that and approve of their participation in the Summer Camp Swim Test; I understand that if they do pass this test they will be allowed to swim, all summer, without a personal flotation device and in the deep end of the UMD Pool during Swim Time at the UMD KIDSROCK Summer Camp; I also understand that if they do not pass they will need to wear a personal flotation device and not allowed to swim in the deep end of the pool. I also understand the final decision of the minimum requirements being met is determined by and at the discretion of the RSOP Lifeguards, in conjunction with UMD KIDSROCK Staff. For full policy go to www.umdrsop.org

Printed Parent/Guardian Name  Parent/Guardian Signature  Date
PARTICIPANT HEALTH INFORMATION

The following information will help the program respond effectively to medical situations, and will be kept confidential by the RSOP professional staff in the RSOP Youth Program. Please complete this form and answer all BOLD (highlighted) questions.

CHILD’S NAME: ____________________________________________

Family Doctor: ___________________________ Phone: ___________________________

Health Insurance Company: ___________________________ Phone: ___________________________

Insurance Policy #: ___________________________ Today’s Date: ___________________________

Child’s Allergies: (include allergies to food, medications, latex, insects, penicillin, clothing, etc.)

________________________________________________________________________

For existing allergies, please describe the allergic reaction and treatment: (include medications to be taken)

________________________________________________________________________

Has your child experienced any of the following medical conditions? (circle answer, add notes as necessary)

- Difficulty Hearing
  - YES
  - NO
  - Notes: ______________________________________________________________________

- Eyestrain (Light Sensitive)
  - YES
  - NO
  - Notes: ______________________________________________________________________

- Restricted Breathing/Asthma
  - YES
  - NO
  - Notes: ______________________________________________________________________

- Hypothermia/Frostbite
  - YES
  - NO
  - Notes: ______________________________________________________________________

- Heat Stroke/Exhaustion
  - YES
  - NO
  - Notes: ______________________________________________________________________

- Muscle Spasms/Cramps
  - YES
  - NO
  - Notes: ______________________________________________________________________

- Chronic Back Pain
  - YES
  - NO
  - Notes: ______________________________________________________________________

- Chronic Joint Pain/Arthritis
  - YES
  - NO
  - Notes: ______________________________________________________________________

- Chronic Stomach Pain
  - YES
  - NO
  - Notes: ______________________________________________________________________

- Abnormal Blood Pressure
  - YES
  - NO
  - Notes: ______________________________________________________________________

- Convulsions/Seizures
  - YES
  - NO
  - Notes: ______________________________________________________________________

- Vertigo/Dizziness
  - YES
  - NO
  - Notes: ______________________________________________________________________

- Periods of Unconsciousness
  - YES
  - NO
  - Notes: ______________________________________________________________________

- Chronic Headaches/Migraines
  - YES
  - NO
  - Notes: ______________________________________________________________________

Other Conditions: __________________________________________________________________________

Please explain any current treatments for the medical conditions indicated in the previously question:

________________________________________________________________________
Date of your child’s last Tetanus shot: __________________________ (Month/Year)

Does your child have any medical condition(s) that our staff should know about? (please list condition, medications, treatment, etc.) ______________________________

______________________________________________________________

Does your child have any physical, mental, or behavioral condition(s) that our staff should know about? (please list condition, medications, treatment, etc.) ______________________________

______________________________________________________________

University of Minnesota, Duluth RSOP Youth Programs
- MEDICAL CONFIDENTIALITY AGREEMENT –

RSOP Program: UMD KIDSROCK 2019
Date of Program: June 10th through to August 9th, 2019

CHILD’S NAME: ________________________________

I have read and understand this form’s contents completely and have answered the above questions accurately.

I believe that my son/daughter is in good physical condition and that he/she can participate fully in camp activities.

The staff of the UMD Recreational Sports Outdoor Program has my authorization to review and retain this form as protected health information for the purposes of the above program. The staff at UMD Recreational Sports Outdoor Program has permission to seek and/or administer emergency care for my son/daughter in the event a parent or guardian cannot respond at the time of emergency and has my authorization to provide this form to health care personnel for the purposes of the participant’s emergency treatment in that event. I understand that UMD Recreational Sports Outdoor Program is not responsible for any charges for such health care services provided to my child.

I understand that I have the right to revoke, in writing, this authorization at any time; however, this authorization will automatically expire at the end of the above program. I am aware that my revocation is not effective to the extent that the persons I have authorized to use and/or disclose my child’s protected health information have acted in reliance upon this authorization. Further, I understand that, if my child’s protected health information is disclosed to someone who is not required to comply with the federal privacy protection regulations, then such information may be redisclosed and would no longer be protected.

PARENT/GUARDIAN SIGNATURE: ____________________________ DATE: ____________

PARENT/GUARDIAN SIGNATURE: ____________________________ DATE: ____________

EMERGENCY CONTACT(S) (Should an emergency situation or disciplinary issue arise the following adults will be contacted.)

Name: ____________________________ Phone: ____________________________ Relationship: ____________________________

Name: ____________________________ Phone: ____________________________ Relationship: ____________________________

CHECK-OUT APPROVAL LIST Aside from the Contact Guardian, the following adults are approved to pick up your child during camp Check-out.

Name: ____________________________ Relationship: ____________________________

Name: ____________________________ Relationship: ____________________________

*All individuals authorized on the list(s) above to drop off and/or pick up your child will need to provide photo identification if/when requested by the RSOP Youth Program Staff (see pg. 3 for more detail).
HH#_________ 2019 PARTICIPANT REGISTRATION

INFORMATION

Please read carefully and complete this UMD KIDSROCK Registration Form and answer all BOLD (highlighted) questions.

Child’s Name: ___________________________ Date of Birth: ___________ AGE: ______


Contact Guardian(s):
1. Name: ___________________________ Phone: ___________ Email: ___________
2. Name: ___________________________ Phone: ___________ Email: ___________

Home Address: ___________________________ ___________________________ ___________________________

KIDSROCK REGISTRATION 2019

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<th>WEEKS</th>
<th>WEEK 1</th>
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<td>July 1-3</td>
<td>July 8-12</td>
<td>July 15-19</td>
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</tr>
</tbody>
</table>

For RSOP Administration use only

TOTALS:  □ 10% Registration Day Discount  □ 5% FAC / STAFF/ Student Discount  FINAL PAYMENT:

Registration Date: ___________________________ RSOP Staff Initials: ___________________________